

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T-G		7/30/01
O.I.P.E. CLASSIFIER		43	8/3/01
FORMALITY REVIEW	M.D.	8817	8/30/01
RESPONSE FORMALITY REVIEW	A-S	866	10-25-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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028830
 88-30-01
 5C-571
 10/25/01